STATE OF MARYLAND DEPARTMENT OF GENERAL SERVICES MARYLAND CAPITOL POLICE

Order to Submit to Interrogation

		Date:
To:		Assignment:
From:		Assignment:
In accordance with the La	w Enforcement Office	rs' Bill of Rights, you are hereby ordered to report to
(Location)		
on(Date)	, at	hours for the purpose of interrogation in
reference to Internal Affairs Unit of	ease number	·
Employee's Signature:		Date:
Witness Signatura:		Date: